

**PART B - FEE(S) TRANSMITTAL**



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21171 7590 06/09/2006

**STAAS & HALSEY LLP**  
**SUITE 700**  
**1201 NEW YORK AVENUE, N.W.**  
**WASHINGTON, DC 20005**

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(Depositor's name)

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APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/763,029	04/10/2001	Manfred Schaefer	1454.1048/RA	1983

**TITLE OF INVENTION: METHOD, ARRAY AND SET OF SEVERAL ARRAYS FOR PROTECTING SEVERAL PROGRAMS AND/OR FILES FROM UNAUTHORIZED ACCESS BY A PROCESS**

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1400	\$0	\$1400	09/11/2006
EXAMINER	ART UNIT		CLASS-SUBCLASS		
SHERKAT, AREZOO	2131		711-152000		

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.  
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2. For printing on the patent front page, list

(1) the names of up to 3 registered patent attorneys or agents OR, alternatively,  
(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1 **STAAS & HALSEY LLP**

2 \_\_\_\_\_

3 \_\_\_\_\_

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment. 09/07/2006 MBERHEI 00000252 09763029

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE or COUNTRY)

1400.00 OP

**SIEMENS AKTIENGESELLSCHAFT**

**MUNICH, GERMANY**

Please check the appropriate assignee category or categories (will not be printed on the patent):  Individual  Corporation or other private group entity  Government

4a. The following fee(s) are enclosed:

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 The Director is hereby authorized to charge the required fee(s), or credit any overpayment, to Deposit Account Number **19-3935** (enclose an extra copy of this form).

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a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.  b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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Typed or printed name

**RICHARD A. GOLLHOFER**

Date

**9/6/06**

Registration No.

**31,106**

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